A change of power of attorney and/or address letter.

PCT Request, Search Report and cited references.

16. LX Other items or information:

15

422 Rec'd PCT/PTO 2 1 APR 2000

u.s. APPLICATION NO. (If ki	0979 919	INTERNATIONAL APPLICATION PCT/JP99/04674	ON NO.			EY'S DOCKET NUMBER 90-055
7. X The following fees are submitted:				CALCULATIONS PTO USE ONLY		
Basic National Fee (37 CFR 1.492(a)(1)-(5)):						
Search Report has been prepared by the EPO or JPO						
International preliminary examination fee paid to USPTO (37 CFR 1.482) \$670.00 (956) No international preliminary examination fee paid to USPTO (37 CFR 1.482) but international search fee paid to USPTO (37 CFR 1.445(a)(2)) \$690.00 (958)						
Neither international preliminary examination fee (37 CFR 1.482) nor international search fee (37 CFR 1.445(a)(2)) paid to USPTO \$970.00 (960)						
International preliminary examination fee paid to USPTO (37 CFR 1.482) and all claims satisfied provisions of PCT Article 33(2)-(4)				_		
ENTER APPROPRIATE BASIC FEE AMOUNT =					0.00	
Surcharge of \$130.00 (154) for furnishing the oath or declaration later than months from the earliest claimed priority date (37 CFR 1.492(e)).					0.00	
Claims	Number Filed	Number Extra	Rate			
Total Claims	18 -20 =		X\$18.00 (966)	\$ (0.00	
Îndependent Claims	. 2 -3 =	0	X\$78.00 (964)	\$ (0.00	
Multiple dependent claim(s) (if applicable) + \$260.00 (968)				\$ (0.00	
TOTAL OF ABOVE CALCULATIONS =				\$ 840	0.00	
Reduction for 1/2 for filing by small entity, if applicable. Verified Small Entity statement must also be filed. (Note 37 CFR 1.9, 1.27, 1.28).				\$ (0.00	
SUBTOTAL =				\$ 840	0.00	
Processing fee of \$130.00 (156) for furnishing the English translation later than months from the earliest claimed priority date (37 CFR 1.492(f)).				\$ (0.00	
TOTAL NATIONAL FEE =				\$ 840	0.00	
Fae for recording the enclosed assignment (37 CFR 1.21(h)). The assignment must be accompanied by an appropriate cover sheet (37 CFR 3.28, 3.31). per property +				\$ 40	0.00	
TOTAL FEES ENCLOSED -					0.00	
TOTAL TELS ENOUGHD =				Amount		\$
						\$
a. A check in the amount of \$ 880.00 to cover the above fees is enclosed. b. Please charge my Deposit Account No. 02-4800 in the amount of \$ to cover the above fees. A duplicate copy of this sheet is enclosed.						
c. The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. 02-4800. A duplicate copy of this sheet is enclosed.						
NOTE: Where an app	propriate time limit under 37 Cl estore the application to pendi	FR 1.494 or 1.495 has not being status.	en met, a petition to re	evive (37 CFR	1.137(a	a) or (b)) must be
SEND ALL CORRESPONDENCE TO:						
Robert E. Krebs, Esq. BURNS, DOANE, SWECKER & MATHIS, L.L.P. P.O. Box 1404						
Alexandria, Virginia 22313-1404 Robert E. Krebs NAME						
25,885 REGISTRATION NUMBER						

1